

River City Radio Controllers (RCRC) 2020 Membership Application

Please Frini Clearly		
Name:	A	MA#
Address:		
City – State – Zip	Code:	
E-Mail address:	Oc	ecupation:
Home Phone:	Cell Phono	e:
member information to any	•	
Applications received with	hold current (2020) membership in the Academy of Mo nout a 2020 AMA Membership Number - will be return Paying by PayPal will cost member \$3 extra. Cash Pay By Check Pay by	ned to applicant.
New Member	\$80.00 per calendar year	1-1-20 thru 12-31-20
Junior Member (under age 18)	\$20.00 per calendar year	1-1-20 thru 12-31-20
Current Member Renewal		

Membership in RCRC is subject to acceptable proof of AMA Membership.

(Must be Member in 2019) \$70.00 per calendar year

Club membership is effective upon acceptance by RCRC and expires December 31, 2020. If your membership lapsed the year before pay the new member rate.

Lifetime members are required to complete an application/waiver annually to provide current contact information; to fulfill the park's waiver requirement, and to acknowledge acceptance of the club's safety rules.

1-1-20 thru 12-31-20

You must complete and sign the waiver on the reverse side of this application. Incomplete applications cannot be processed.

WAIVER OF LIABILITY

In consideration of the permission of the Commonwealth of Kentucky, Department of Parks for the use of the model aircraft flying site located at E.P. "Tom" Sawyer State Resort Park, Louisville, Kentucky, I hereby for myself, my heirs, executors and administrators, do release and discharge The Commonwealth of Kentucky, Department of Parks and employees and agent thereof, of any damages, demands, or actions in any manner arising or growing out of my use of the aforementioned premises. I attest and verify that I have full knowledge of the risks involved in flying model aircraft. I agree prior to participation in any event that I will inspect the facilities and if I believe anything is unsafe, I will immediately advise the Officers of the River City Radio Control Club and refuse to participate.

I have read and agree to abide by the RCRC and E.P. "Tom" Sawyer State Park safety rules.

Annlicant - Complete this section.

Applicant Complete this seed	ton.
Printed Name:	AMA#
Signature :	Date:
If the applicant is under 18, paren	at or legal guardian must complete this section:
Parent/Guardian Printed Name:	
Signature:	Date:
Emerge	ncy Contact Information
Contact : Phone Number	
Current RCRC Safety Rules are po on-line at: http://rcrcky.com	sted in the pavilion at the field and are also available
Checks should be made pay	rable to: River City Radio Controllers
Send completed application to:	River City Radio Controllers P.O. Box 99356 Louisville, KY 40269